ARTHROCARE CORPORATION

595 N. Pastoria Avenue Sunnyvale, CA 94086 (408) 736-0224

Customer No. 21394

PATENT APPLICATION **ASSISTANT COMMISSIONER FOR PATENTS**

Figure 1 Property 10 Propert

Alty. Docket No. C-0-2	_
"Express Mail" Label No. EE263480723US	
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Date of Deposit April 3, 1998	

I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231

Atty Docket No.

Transmitted herewith for filing under 1.53(b) is the [X] patent application, [] design patent application, [] continuation-in-part patent application of

Inventor(s): PHILIP E. EGGERS and HIRA V. THAPLIYAL

ቼor: SYSTEMS AND METHODS FOR ELECTROSURGICAL MYOCARDIAL REVASCULARIZATION

[X] This application claims priority from each of the following Application Nos./filing dates:

08/753,227 / November 22, 1996; 08/562,331 / November 22, 1995;

Enclosed are:

sheet(s) of [X] formal [] informal drawing(s).

An assignment of the invention to ArthroCare Corporation [] is enclosed [X] was filed in the earliest of the above-identified patent application(s).

[X] An Information Disclosure Statement w/ PTO-1449

A signed Declaration [] is enclosed [X] was filed in the earliest of the above-identified patent application(s).

A Power of Attorney by Assignee [] is enclosed [X] was filed in the earliest of the above-identified patent application(s).

A verified statement to establish small entity status under 37 CFR 1.9 and 37 CFR 1.27 [] is enclosed [] was filed in the earliest of the above-identified patent application(s); or [X] is no longer applicable for this application.

[X] A Preliminary Amendment is enclosed.

松] A Change of Correspondence Address is enclosed.

The filing fee has been calculated as shown below:

ol. 1)	(Col. 2)
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FOR:	NO.	FILED	NO	D. EXTRA
BASIC FEE				
TOTAL CLAIMS	73	-20=	* 5	53
INDEP CLAIMS	4	-3=	*	1
[] MULTIPLE DEPENDENT CLAIM PRESENTED				

^{*} If the difference in Col. 1 is less than zero, enter "0" in Col. 2

OTHER THAN A

SMALL ENTITY

RATE	FEE	OR
	\$395	OR
x11=	\$	OR
x41=	\$	OR
+130=	\$	OR
TOTAL	\$	OR

SMALL ENTITY

RATE	FEE
	\$790
x22=	\$1166
x82=	\$82
+260=	\$
TOTAL	\$2038

Please charge Deposit Account No. 50-0359 as follows:

[X] Filing fee

[X] Any additional fees associated with this paper or during the pendency of this application

The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).

is enclosed. [] A check for \$ _ extra copies of this sheet are enclosed. Respectfully submitted,

ARTHROCARE CORPORATION

\$ 2,038.00

ph: (408) 736-0224

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231

Attorney Docket No. C-6-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

PHILIP E. EGGERS et al.

Examiner:

Application No.: unassigned

Art Unit:

Filed: herewith

For: SYSTEMS AND METHODS FOR

ELECTROSURGICAL MYOCARDIAL

REVASCULARIZATION

CHANGE OF CORRESPONDENCE ADDRESS

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

Please change the correspondence address and telephone numbers for this application as follows:

> ArthroCare Corporation 595 N. Pastoria Avenue Sunnyvale, California 94086

ph: (408) 736-0224 fx: (408) 736-0226

Respectfully submitted,

Reg. No. 38,585